

Applicant or Patentee: Burnett & K. H. G. Attorney's
Serial or Patent No.: _____ Docket No.: 06073
Filed or Issued: February 4, 1999
For: Live Vaccine for Human Immunodeficiency Virus

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(c)) - NONPROFIT ORGANIZATION**

I hereby declare that I am an official of the nonprofit organization empowered to act on behalf of the concern identified below:

NAME OF ORGANIZATION: Research Development Foundation
ADDRESS OF CONCERN: 402 North Division Street
Carson City, Nevada 89703

TYPE OF ORGANIZATION:

☒ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(a) AND 501(c)(3))

I hereby declare that the above identified nonprofit organization qualifies as a nonprofit organization as defined in 37 CFR 1.9(e), for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization identified above with regard to the invention, entitled as above by inventor(s) as above described in

☒ the specification filed herewith
☐ application serial no. _____, filed _____
☐ patent no. _____, issued _____

If the rights held by the above identified nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME _____

ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: JAMES F. WEILER

TITLE OF PERSON OTHER THAN OWNER: VICE PRESIDENT

ADDRESS OF PERSON SIGNING ONE RIVERWAY, SUITE 1560, HOUSTON, TEXAS 77056

SIGNATURE: J. F. Weiler

DATE: 02/02/99

FROM : MCGREGOR&ADLER,P.C.

PHONE NO. :

Feb. 01 1999 11:21AM P3

DOCKET NO: D6073

COMBINED DECLARATION AND POWER OF ATTORNEY

I, **George Barrie Kitto**, hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and co-inventor, together with **Mary Susan Burnett**, of the subject matter which is claimed and for which a patent is sought on the invention entitled, **Live Vaccine For Human Immunodeficiency -Virus**, the specification of which is attached hereto and which claims benefit of priority under 35 USC 119(e) of USSN 60/073,943 filed February 6, 1998.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment, referred to above. I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office, connected therewith: **Dr. Benjamin Adler**, Registration No. 35,423. Address all telephone calls to **Dr. Benjamin Adler** at telephone number 713/777-2321. Address all correspondence to **Dr. Benjamin Adler**, **MCGREGOR & ADLER, LLP**, 8011 Candle Lane, Houston, TX 77071.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: George Barrie Kitto

Inventor's Signature: *George Barrie Kitto* Date: Feb 1 1999

Residence Address: 5102 Crestway, Austin Texas 78731

Citizen of: United States of America

Post Office Address: Austin Texas 78731

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DOCKET NO: D6073

COMBINED DECLARATION AND POWER OF ATTORNEY

I, Mary Susan Burnett, hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and co-inventor, together with George Barrie Kitto, of the subject matter which is claimed and for which a patent is sought on the invention entitled, Live Vaccine For Human Immunodeficiency Virus, the specification of which is attached hereto and which claims benefit of priority under 35 USC 119(e) of USSN 60/073,943 filed February 6, 1998.

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Full Name of Inventor: Mary Susan Burnett

Inventor's Signature: Mary Susan Burnett Date: Feb 1, 1999

Residence Address: 13413 Bolivia Dr. Austin, TX 78729 4963 SWINTON DR
UMSB FAIRFAX, VA 22032

Citizen of: United States of America

Post Office Address: Austin, TX 78729 UMSB
FAIRFAX, VA 22032

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